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**UTILITY
PATENT APPLICATION
TRANSMITTAL**
(Only for new nonprovisional applications under 37 CFR 1.53(b))

| | | | |
|--|--|---|--|
| APPLICATION ELEMENTS | | Attorney Docket No. 0165-278 | |
| See MPEP chapter 600 concerning utility patent application contents. | | First Inventor KEISUKE IMAI ET AL. | |
| 1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original and a duplicate for fee processing)</i> | | Title ROLL CONNECTOR STRUCTURE FOR A VEHICLE | |
| 2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. | | Express Mail Label No. | |
| 3. <input checked="" type="checkbox"/> Specification [Total Pages 15] <i>(preferred arrangement set forth below)</i> <ul style="list-style-type: none"> - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (<i>if filed</i>) - Detailed Description - Claim(s) - Abstract of the Disclosure | | Assistant Commissioner for Patents Box Patent Application Washington, DC 20231 | |
| 4. <input type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 4] | | 7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) | |
| 5. Oath or Declaration [Total Sheets 5] | | 8. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i> <ul style="list-style-type: none"> a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: <ul style="list-style-type: none"> i. <input type="checkbox"/> CD-ROM or CD-R (2 copies; or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies | |
| ACCOMPANYING APPLICATION PARTS | | | |
| 9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s)) | | | |
| 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney <i>(when there is an assignee)</i> | | | |
| 11. <input type="checkbox"/> English Translation Document (<i>if applicable</i>) | | | |
| 12. <input type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449 Citations | | | |
| 13. <input type="checkbox"/> Preliminary Amendment | | | |
| 14. <input type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i> | | | |
| 15. <input checked="" type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i> | | | |
| 16. <input type="checkbox"/> Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. | | | |
| 17. <input type="checkbox"/> Other. | | | |
| 18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) | | | |
| of prior application No. _____ / _____ | | | |
| Prior application information. Examiner _____ Group / Art Unit: _____ | | | |
| For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. | | | |
| 19. CORRESPONDENCE ADDRESS | | | |
| <input type="checkbox"/> Customer Number or Bar Code Label | | (Insert Customer No. or attach bar code label here) | |
| Name NIXON PEABODY LLP 8180 Greensboro Drive, Suite 800 | | or <input type="checkbox"/> Correspondence address below | |
| Address | | | |
| City McLean State VA Zip Code 22102 | | Telephone (703) 790-9110 Fax (703) 883-0370 | |
| Country United States | | | |
| Name (Print/Type) THOMAS W. COLE Registration No. (Attorney/Agent) 28,290 | | | |
| Signature <u>Thomas Cole</u> Date 3 Jan '01 | | | |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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FEE TRANSMITTAL FOR FY 2001

Patent fees are subject to annual revision

TOTAL AMOUNT OF PAYMENT (\$750.00)

Complete if Known

| | |
|----------------------|---------------------|
| Application Number | UNASSIGNED |
| Filing Date | UNASSIGNED |
| First Named Inventor | KEISUKE IMAI ET AL. |
| Examiner Name | UNASSIGNED |
| Group Art Unit | UNASSIGNED |

Attorney Docket No. 0165-278

METHOD OF PAYMENT

FEE CALCULATION (continued)

The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

19-2380(0165-278)

Deposit Account Name
NIXON PEABODY LLP Charge Any Additional Fee Required
Under 37 CFR 1.16 and 1.17 Applicant claims small entity status.
See 37 CFR 1.27

3. ADDITIONAL FEES

| Large Entity Fee Code (\$) | Small Entity Fee Code (\$) | Fee Description | Fee Paid |
|----------------------------|----------------------------|-----------------|---|
| 105 | 130 | 205 | 65 Surcharge - late filing fee or oath |
| 127 | 50 | 227 | 25 Surcharge - late provisional filing fee or cover sheet |
| 139 | 130 | 139 | 130 Non-English transaction |
| 147 | 2,520 | 147 | 2,520 For filing a request for <i>ex parte</i> reexamination |
| 112 | 920* | 112 | 920* Requesting publication of SIR prior to Examiner action |
| 113 | 1,840* | 113 | 1,840* Requesting publication of SIR after Examiner action |
| 115 | 110 | 215 | 55 Extension for reply within first month |
| 116 | 390 | 216 | 195 Extension for reply within second month |
| 117 | 890 | 217 | 445 Extension for reply within third month |
| 118 | 1,390 | 218 | 695 Extension for reply within fourth month |
| 128 | 1,890 | 228 | 945 Extension for reply within fifth month |
| 119 | 310 | 219 | 155 Notice of Appeal |
| 120 | 310 | 220 | 155 Filing a brief in support of an appeal |
| 121 | 270 | 221 | 135 Request for oral hearing |
| 138 | 1,510 | 138 | 1,510 Petition to institute a public use proceeding |
| 140 | 110 | 240 | 55 Petition to revive - unavoidable |
| 141 | 1,240 | 241 | 620 Petition to revive - unintentional |
| 142 | 1,240 | 242 | 620 Utility issue fee (or reissue) |
| 143 | 440 | 243 | 220 Design issue fee |
| 144 | 600 | 244 | 300 Plant issue fee |
| 122 | 130 | 122 | 130 Petitions to the Commissioner |
| 123 | 50 | 123 | 50 Petitions related to provisional applications |
| 126 | 240 | 126 | 240 Submission of Information Disclosure Stmt |
| 581 | 40 | 581 | 40 Recording each patent assignment per property (times number of properties) 40.00 |
| 146 | 710 | 246 | 355 Filing a submission after final rejection (37 CFR § 1.129(a)) |
| 149 | 710 | 249 | 355 For each additional invention to be examined (37 CFR § 1.29(b)) |
| 179 | 710 | 249 | 355 Request for Continued Examination (RCE) |
| 169 | 900 | 169 | 900 Request for expedited examination of a design application |

* Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(\$40.00)

| Large Entity Fee Code (\$) | Small Entity Fee Code (\$) | Fee Description | Fee Paid |
|----------------------------|----------------------------|-----------------|--|
| 103 | 18 | 203 | 9 Claims in excess of 20 |
| 102 | 80 | 202 | 40 Independent claims in excess of 3 |
| 104 | 270 | 204 | 135 Multiple dependent claim, if not paid |
| 109 | 80 | 209 | 40 ** Reissue independent claims over original patent |
| 110 | 18 | 210 | 9 ** Reissue claims in excess of 20 and over original patent |

SUBTOTAL (2) (\$)

** or number previously paid, if greater; For Reissues, see above

Complete if applicable

| | | | | | |
|--------------------------------|--------------------------------------|--------------------------------------|--------|-----------|--------------|
| Name (Print/Type) Signature | THOMAS W. COLE <i>Thomas Cole</i> | Registration No. (Attorney/Agent) | 28,290 | Telephone | 703 790 9110 |
| | | | | Date | 3 Jan '01 |

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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